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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application No.	09/191,277
	Filing Date	November 12, 1998
	First Named Inventor	Toru Matsuda
	Group Art Unit	2155
	Examiner Name	P. Tran
Total Number of Pages in This Submission	Attorney Docket Number	74451P093

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ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment / Response  <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application)  <input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition  <input type="checkbox"/> To Convert a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Small Entity Statement  <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Return Receipt Postcard</div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Paul A. Mendonsa, Reg. No. 42,879 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	October 10, 2001

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class mail with sufficient postage in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on: October 10, 2001			
Typed or printed name	Deborah L. Higham		
Signature		Date	October 10, 2001

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<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2000</h2> <p style="font-size: small; margin: 5px 0;">Patent fees are subject to annual revision.</p>		<p style="margin: 0;"><b>Complete if Known</b></p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="width: 50%;">Application No.</td><td style="width: 50%;">09/191,277</td></tr> <tr><td>Filing Date</td><td>November 12, 1998</td></tr> <tr><td>First Named Inventor</td><td>Toru Matsuda</td></tr> <tr><td>Examiner Name</td><td>P. Tran</td></tr> <tr><td>Group/Art Unit</td><td>2155</td></tr> <tr><td>Attorney Docket No.</td><td>74451P093</td></tr> </table>		Application No.	09/191,277	Filing Date	November 12, 1998	First Named Inventor	Toru Matsuda	Examiner Name	P. Tran	Group/Art Unit	2155	Attorney Docket No.	74451P093
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<p><b>TOTAL AMOUNT OF PAYMENT</b></p>		<p>(\$) 0.00</p>													

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<p><b>METHOD OF PAYMENT (check one)</b></p> <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit any overpayments to:</p> <p>Deposit Account Number: <span style="border: 1px solid black; padding: 2px;">02-2666</span></p> <p>Deposit Account Name: <span style="border: 1px solid black; padding: 2px;">Blakely, Sokoloff, Taylor &amp; Zafman LLP</span></p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee(s) Required Under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>2. <input type="checkbox"/> <b>Payment Enclosed:</b></p> <p><input type="checkbox"/> Check   <input type="checkbox"/> Credit card   <input type="checkbox"/> Money Order   <input type="checkbox"/> Other</p> <p style="text-align: center;"><b>FEE CALCULATION</b></p> <p><b>1. BASIC FILING FEE</b></p> <table border="1" style="width:100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>101</td><td>740</td><td>201</td><td>370</td><td>Utility filing fee</td><td></td></tr> <tr><td>106</td><td>330</td><td>206</td><td>165</td><td>Design filing fee</td><td></td></tr> <tr><td>107</td><td>510</td><td>207</td><td>255</td><td>Plant filing fee</td><td></td></tr> <tr><td>108</td><td>740</td><td>208</td><td>370</td><td>Reissue filing fee</td><td></td></tr> <tr><td>114</td><td>160</td><td>214</td><td>80</td><td>Provisional filing fee</td><td></td></tr> <tr> <td colspan="5" style="text-align: right;"><b>SUBTOTAL (1)</b></td> <td>(\$)</td> </tr> </tbody> </table> <p><b>2. 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<b>SUBMITTED BY</b>				<b>Complete (if applicable)</b>	
Name (Print/Type)	Paul A. Mendonsa	Registration No. (Attorney/Agent)	42,879	Telephone	(503) 684-6200
Signature				Date	10/10/01

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Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED